



Bib Data Sheet

CONFIRMATION NO. 6462

<b>SERIAL NUMBER</b> 10/511,206	<b>FILING OR 371(c) DATE</b> 05/02/2005 <b>RULE</b>	<b>CLASS</b> 141	<b>GROUP ART UNIT</b> 3751	<b>ATTORNEY DOCKET NO.</b> P08417US00/MP	
<b>APPLICANTS</b> Libero Facchini, San Lazzaro di Savena, ITALY; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/EP03/04821 05/08/2003 <i>TCM</i> <b>** FOREIGN APPLICATIONS *****</b> ITALY B02002A000282 05/13/2002 <i>TCM</i>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>TCM</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> ITALY	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 34	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 00881					
<b>TITLE</b> Capsule filling machine					
<b>FILING FEE RECEIVED</b> 1332	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

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